

(LEFT INSIDE)

Claim	ID No.	Date
1	61	6/20/45
2	62	6/20/45
3	63	6/20/45
4	64	6/20/45
5	65	6/20/45
6	66	6/20/45
7	67	6/20/45
8	68	6/20/45
9	69	6/20/45
10	70	6/20/45
11	71	6/20/45
12	72	6/20/45
13	73	6/20/45
14	74	6/20/45
15	75	6/20/45
16	76	6/20/45
17	77	6/20/45
18	78	6/20/45
19	79	6/20/45
20	80	6/20/45
21	81	6/20/45
22	82	6/20/45
23	83	6/20/45
24	84	6/20/45
25	85	6/20/45
26	86	6/20/45
27	87	6/20/45
28	88	6/20/45
29	89	6/20/45
30	90	6/20/45
31	91	6/20/45
32	92	6/20/45
33	93	6/20/45
34	94	6/20/45
35	95	6/20/45
36	96	6/20/45
37	97	6/20/45
38	98	6/20/45
39	99	6/20/45
40	100	6/20/45
41	101	6/20/45
42	102	6/20/45
43	103	6/20/45
44	104	6/20/45
45	105	6/20/45
46	106	6/20/45
47	107	6/20/45
48	108	6/20/45
49	109	6/20/45
50	110	6/20/45

SYMBOLS
 + N - A
 - (Through number) Crossed out
 / Reversed numbers
 \ Interchange numbers
 (Reversed numbers)
 (Through number) Crossed out
 Reversed numbers
 Oblique
 Dashed

Claim	ID No.	Date	Final
1	1	6/20/45	6/20/45
2	2	6/20/45	6/20/45
3	3	6/20/45	6/20/45
4	4	6/20/45	6/20/45
5	5	6/20/45	6/20/45
6	6	6/20/45	6/20/45
7	7	6/20/45	6/20/45
8	8	6/20/45	6/20/45
9	9	6/20/45	6/20/45
10	10	6/20/45	6/20/45
11	11	6/20/45	6/20/45
12	12	6/20/45	6/20/45
13	13	6/20/45	6/20/45
14	14	6/20/45	6/20/45
15	15	6/20/45	6/20/45
16	16	6/20/45	6/20/45
17	17	6/20/45	6/20/45
18	18	6/20/45	6/20/45
19	19	6/20/45	6/20/45
20	20	6/20/45	6/20/45
21	21	6/20/45	6/20/45
22	22	6/20/45	6/20/45
23	23	6/20/45	6/20/45
24	24	6/20/45	6/20/45
25	25	6/20/45	6/20/45
26	26	6/20/45	6/20/45
27	27	6/20/45	6/20/45
28	28	6/20/45	6/20/45
29	29	6/20/45	6/20/45
30	30	6/20/45	6/20/45
31	31	6/20/45	6/20/45
32	32	6/20/45	6/20/45
33	33	6/20/45	6/20/45
34	34	6/20/45	6/20/45
35	35	6/20/45	6/20/45
36	36	6/20/45	6/20/45
37	37	6/20/45	6/20/45
38	38	6/20/45	6/20/45
39	39	6/20/45	6/20/45
40	40	6/20/45	6/20/45
41	41	6/20/45	6/20/45
42	42	6/20/45	6/20/45
43	43	6/20/45	6/20/45
44	44	6/20/45	6/20/45
45	45	6/20/45	6/20/45
46	46	6/20/45	6/20/45
47	47	6/20/45	6/20/45
48	48	6/20/45	6/20/45
49	49	6/20/45	6/20/45
50	50	6/20/45	6/20/45

INDEX OF CLAIMS

POSITION	EXAMINER	TYPEST	VERIFER	CORPS CORR.	SPEC. HAND	FILE MANT.	DRAFTING
CLASSEIFFER	61	61	60	60	60	60	60
	62	62	62	62	62	62	62
	63	63	63	63	63	63	63
	64	64	64	64	64	64	64
	65	65	65	65	65	65	65
	66	66	66	66	66	66	66
	67	67	67	67	67	67	67
	68	68	68	68	68	68	68
	69	69	69	69	69	69	69
	70	70	70	70	70	70	70
	71	71	71	71	71	71	71
	72	72	72	72	72	72	72
	73	73	73	73	73	73	73
	74	74	74	74	74	74	74
	75	75	75	75	75	75	75
	76	76	76	76	76	76	76
	77	77	77	77	77	77	77
	78	78	78	78	78	78	78
	79	79	79	79	79	79	79
	80	80	80	80	80	80	80